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<b>REVOCATION OF POWER OF ATTORNEY WITH NEW POWER OF ATTORNEY AND CHANGE OF CORRESPONDENCE ADDRESS</b>	Application Number	10/587,644
	Filing Date	July 27, 2006
	First Named Inventor	John P. TOSCANO
	Art Unit	Not Yet Assigned
	Examiner Name	Not Yet Assigned
	Attorney Docket Number	404812000800

I hereby revoke all previous powers of attorney given in the above-identified application.

A Power of Attorney is submitted herewith.

**OR**

I hereby appoint the practitioners associated with the Customer Number: 25226

Please change the correspondence address for the above-identified application to:

The address associated with  
Customer Number: 25226

**OR**

<input type="checkbox"/>	Firm or Individual Name
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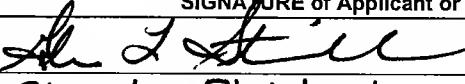
Address					
City					
Country		State	Zip		
Telephone			Email		

I am the:

Applicant/Inventor.

Assignee of record of the entire interest. See 37 CFR 3.71.  
 Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96)

**SIGNATURE of Applicant or Assignee of Record**

Signature					
Name	Glen L. Steinbach				
Date	Jan. 16, 2008	Telephone	410-516-8300		

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below\*.

\*Total of 1 forms are submitted.